

Student Intensive Needs-Review Checklist

Complete the following checklist to assist in the development of an overview of the student's needs in direct relation to the classroom setting. The checklist may also assist in determining **if** a student should have the assistance of a paraeducator/ instructional assistant.

Student's Name:	Date Prepared:
Education Team Members:	Date ARC Reviewed:

Student Intensive Needs-Review	YES	NO
1. Is there an increased safety concern for self and/or others? If yes, please describe:		
2. Does the student require continual teacher prompts for the following?		
a) during direct instruction		
b) after direct instruction (e.g., during independent work)		
c) during and after direct instruction		
3. Does the student require assistance with one or more of the following basic daily living skills? Check all that apply:		
a) toileting		
b) mobility		
c) feeding		
d) dressing		
e) following basic safety rules		
4. Is the student's academic performance consistent with his/her aptitude?		
5. Is the student's behavioral performance consistent with his/her aptitude?		
6. Do the student's peers include the student in classroom activities?		
7. Is the student receptive to peer tutoring and support?		

Student Intensive Needs-Review	YES	NO
8. Is the student currently receiving specialized small group or individualized instruction in specific academic areas? If yes, please describe:		
9. Has an administrator, guidance counselor, or school psychologist observed the student across times and settings?		
10. Have the following interventions or modifications been tried? Describe their rate of success. If the intervention is not an option, please explain why.		
a) cooperative learning		
b) behavior intervention plan		
c) regrouping within the classroom		
d) peer support		
e) other (please list):		
11. Does the educational team recommend the assignment of a paraeducator/instructional assistant to work with this student?		
a) one-on-one daily		
b) in a collaborative setting		